

2011 SEP 16 AM 8:20

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT

(FOR CANDIDATES)

☒ ORIGINAL REPORT

This Report Covers Calendar Year: 2010

☐ AMENDED REPORT

☐ I currently hold an office that would require me to file a Tier 2.1, or Tier 3 Personal Financial Disclosure Statement.
As such, I have completed Schedule L.

Office Sought House of Representatives, District 103

Incumbent: ☐ Yes ☒ No

Date of Election October 22, 2011

Date Qualified September 6, 2011

Name of Filer (print full name) Raymond E. "Ray" Garofalo, Jr.

Mailing Address 2304 Etienne Drive

City, State, Zip Meraux, Louisiana 70075

Name of Spouse (print full name) Joan Seibert Garofalo

Spouse's Occupation Teacher

Spouse's Principal Business Address Not employed at this time.

City, State, Zip _____

Check all that apply:

☐ I have filed my state income tax return for the previous year.

☒ I have filed for an extension of my state income tax return for the previous year.

☐ I have filed my federal income tax return for the previous year.

☒ I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 18:1495.7 and 42:1124.2 does not provide candidates the opportunity to request an extension in filing their personal financial disclosure statements.

Certification of Accuracy

I do hereby certify, after having been duly sworn, that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge, information, and belief.

Signature of Filer

Sworn to and subscribed before me this 13 day of September, 2011.



GUSTAVE L. RIESS
Notary Public (print name)
Gustave L. Riess
Notary Public (signature)

ID#

Date Commission Expires

15861

at Death

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Schedule A: Employment Information☐ Check if not applicable☒ Filer ☐ Spouse ☐ Full-Time ☒ Part-Time

Job Title: Attorney at Law

Name of Employer: Raymond E. Garofalo, Jr.

Address: 2304 Etienne Drive

City, State, Zip: Meraux, Louisiana 70075

Job Description: Attorney

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Job Title:

Name of Employer:

Address:

City, State, Zip:

Job Description:

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Job Title:

Name of Employer:

Address:

City, State, Zip:

Job Description:

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Job Title:

Name of Employer:

Address:

City, State, Zip:

Job Description:

- You are required to disclose employment information related to both you and your spouse.
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.

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Schedule B: Positions - Business☐ Check if not applicable☐ Filer ☐ Spouse ☒ BothAmount of Interest (amount exceeds 10%): 100 %Name of Business: Garofalo Investments, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Business Description: Real Estate DevelopmentNature of Association: Members☐ Filer ☐ Spouse ☒ BothAmount of Interest (amount exceeds 10%): 100 %Name of Business: Merchant Technologies, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Business Description: ATM DeploymentNature of Association: Members☐ Filer ☐ Spouse ☒ BothAmount of Interest (amount exceeds 10%): 100 %Name of Business: LUSOL, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Business Description: Amusement CompanyNature of Association: Members

* You are required to complete Schedule B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business and if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule B: Positions - Business☐ Check if not applicable☐ Filer ☐ Spouse ☒ BothAmount of Interest (amount exceeds 10%): 100 %Name of Business: The Proline Group, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Business Description: Audio/Video ProductionNature of Association: Members☒ Filer ☐ Spouse ☐ BothAmount of Interest (amount exceeds 10%): 50 %Name of Business: Old South, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Business Description: Real Estate DevelopmentNature of Association: Member☒ Filer ☐ Spouse ☐ BothAmount of Interest (amount exceeds 10%): 50 %Name of Business: Park Four, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Business Description: Real Estate DevelopmentNature of Association: Member

* You are required to complete Schedule B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business and if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule C: Positions - Nonprofit**☐ Check if not applicable☒ Filer ☐ SpouseName of Organization: St. Bernard Parish Industrial Development BoardAddress: 8201 W. Judge Perez DriveCity, State, Zip: Chalmette, Louisiana 70043Nature of Association: PresidentDescription of Organization: Industrial Development Board☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

*You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit agency.

Revised February 2011

Form 416B

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LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule D: Income from the State, Political**☐ Check if not applicable**Subdivisions, and/or Gaming Interests**☐ Filer ☐ Spouse ☒ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☒ Gaming InterestName of Business (if applicable): LUSOL, L.L.C.Name of Income Source: LUSOL, L.L.C.Address: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Amount of Income (exact dollar amount): \$ 125,000.00☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

* You are required to complete Schedule D if you or your spouse received income from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

* The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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**Schedule E: Income Received from
Employment**☐ Check if not applicable☐ Filer ☐ Spouse ☐ Full-Time ☒ Part-TimeName of Source of Income: Raymond E. Garofalo, Jr., Attorney at LawAddress: 2304 Etienne DriveCity, State, Zip: Meraux, Louisiana 70075Nature of Services Rendered
(pursuant to such employment): LegalAmount of Income: ☒ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Name of Source of Income: _____

Address: _____

City, State, Zip: _____

Nature of Services Rendered
(pursuant to such employment): _____Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Name of Source of Income: _____

Address: _____

City, State, Zip: _____

Nature of Services Rendered
(pursuant to such employment): _____Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

* You are required to complete Schedule E to disclose the income received by you or your spouse for each full-time or part-time employment position held.

*Income that is reported on Schedule D does not have to be restated on Schedule E.

*Income received through *self-employment* is reported on Schedule F.

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**Schedule F: Income Received from
Business Interests**☐ Check if not applicable**AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS INTERESTS:**

- ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☒ Category IV (more than \$100,000)

☒ Filer☐ SpouseName of Business: See Schedule "B"

Address: _____

City, State, Zip: _____

Nature of services rendered OR
reason income was received: _____☐ Filer☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered OR
reason income was received: _____☐ Filer☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered OR
reason income was received: _____

*You are required to complete Schedule F if you or your spouse received income from a business interest.

*Income reported on Schedule D or E does not have to be restated on Schedule F.

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LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule G: Other Income**☐ Check if not applicable (Any other income that exceeds \$1,000 from each source)☒ Filer ☐ SpouseDescription of Income: Stock & Retirement AccountsNature of Services Rendered or
Reason Income was Received: InterestAmount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☒ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)☐ Filer ☐ Spouse

Description of Income: _____

Nature of Services Rendered or
Reason Income was Received: _____Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)☐ Filer ☐ Spouse

Description of Income: _____

Nature of Services Rendered or
Reason Income was Received: _____Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

*You are required to complete SCHEDULE G if you or your spouse received any other type of income that exceeded \$1,000 from any one source.

*You are not required to report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.

*Income that is reported on SCHEDULE D, E, or F does not have to be restated on SCHEDULE G.

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LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule H: Immovable Property**

(Property that exceeds \$2,000 in value)

☐ Check if not applicable

| | | |
|--|-------------------------|---|
| Location of Property | | <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Both |
| Country: <u>USA</u> | State: <u>Louisiana</u> | Parish/County: <u>St. Bernard</u> |
| Description of Property: <u>2304 Etienne Drive</u> <u>Meraux, Louisiana 70075</u> | | |
| Value of Property: | | |
| <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) | | |
| <input type="checkbox"/> Category III (\$25,000-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000) | | |

| | | |
|---|--------------|--|
| Location of Property | | <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Country: _____ | State: _____ | Parish/County: _____ |
| Description of Property: _____ | | |
| Value of Property: | | |
| <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) | | |
| <input type="checkbox"/> Category III (\$25,000-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000) | | |

| | | |
|---|--------------|--|
| Location of Property | | <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both |
| Country: _____ | State: _____ | Parish/County: _____ |
| Description of Property: _____ | | |
| Value of Property: | | |
| <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) | | |
| <input type="checkbox"/> Category III (\$25,000-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000) | | |

* If the immovable property does not have an address, disclose the location by state and parish or county.

* You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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(An investment holding that exceeds \$5,000)

☒ Filer ☐ Spouse ☐ Both

Name of Security:

Regions Bank Stock

Description of Security:

Stock

☐ Filer ☐ Spouse ☐ Both

Name of Security:

Description of Security:

☐ Filer ☐ Spouse ☐ Both

Name of Security:

Description of Security:

* You are required to complete SCHEDULE I if you or your spouse (either individually or collectively) holds investment securities where each investment security has a value that exceeds \$5,000.

* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, or cash/cash equivalent investments.

* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule J: Transactions**☒ Check if not applicable

(A transaction that exceeds \$5,000)

☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

_____Amount of Transaction: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

_____Amount of Transaction: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

_____Amount of Transaction: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

* You are required to complete SCHEDULE J if you or your spouse (either individually or collectively) purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures (which exceeds \$5,000 each).

* You are not required to report variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, cash or cash equivalent investments.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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(A liability that exceeds \$10,000)

☒ Filer ☐ SpouseName of Creditor: Gulf Coast Bank & TrustAddress: Slidell BranchCity, State, Zip: Slidell, Louisiana

Name of Guarantor (If applicable): _____

☐ Filer ☐ Spouse

Name of Creditor: _____

Address: _____

City, State, Zip: _____

Name of Guarantor (If applicable): _____

☐ Filer ☐ Spouse

Name of Creditor: _____

Address: _____

City, State, Zip: _____

Name of Guarantor (If applicable): _____

☐ Filer ☐ Spouse

Name of Creditor: _____

Address: _____

City, State, Zip: _____

Name of Guarantor (If applicable): _____

*You are required to complete SCHEDULE K if you or your spouse (either individually or collectively) owes any liability which exceeds \$10,000 on the last day of the reporting period.

*You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which secures the loan.

*You are not required to disclose any liability, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse owns any interest, provided that the liability is in the name of the business and, if the liability is a loan, that you or your spouse does not use proceeds from the loan for personal use unrelated to business.

*You are not required to disclose any loan from an immediate family member, unless such family member is a registered lobbyist, or his principal or employer is a registered lobbyist, or he employs or is a principal of a registered lobbyist, or unless such family member has a contract with the State.

**"Consumer Credit Transaction" means a consumer loan or a consumer credit sale but does not include a motor vehicle credit transaction made pursuant to R.S. 6:969.1 et seq, R.S. 9:3516(13).

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Schedule L: Other Offices/Positions Held☒ Check if not applicable

| | |
|--------------------------|-------|
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |
| Name of Office/Position: | _____ |

*You are required to complete SCHEDULE L if you hold any other office or position which would require you to file a personal financial disclosure statement under Section 1124.2.1 or 1124.3.